PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

871,0018.USU

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
	=:- =: 413.40		_	(Column 1)		(Column 2)		TYPE		OR	SMALL	
TC	OTAL CLAIMS		39				R/	ATE	FEE]	RATE	FEE
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		IC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			39 min	39 minus 20=		* 19		9=		OR	X\$18=	342
INDEPENDENT CLAIMS						* 2		40=		OR	X80=	160
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT	RESENT			+1	35=		OR	+270=	
* If	the difference	in column 1 is	less than ze	∍ro, ente	r "0" in c	olumn 2	ТО	TAL		OR	TOTAL	1212
	С	LAIMS AS A	MENDED	MENDED - PART II					<u> </u>		OTHER	THAN
_	Princer State of the Control of the	(Column 1)		(Colui		(Column 3)	SM	SMALL ENTITY			SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT	3	NUM PREVIO	HEST MBER OUSLY FOR	PRESENT EXTRA	RA	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	MIAINT	=	X4	0=		OR	X80=	
	rinoi i nece	NIAHON OF HIS	JEHFLE DE.	ENULIV	1 OLAIIVI		+13	35=		OR	+270=	
							T ADDIT	OTAL . FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	· ·= =		h	• .		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO	HEST MBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON.	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus '	***	T OL AINA]=	X4	0=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLIIPLE DEF	ENDEN	CLATIVI		+13	35=		OR	+270=	
								OTAL . FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	AUDIT	, FEL =			ADDII. FEC	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**	.	=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***	- OL AINA	=	X4	0=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=									OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										L	TOTAL	
***	If the "Highest Nu	ımber Previously Pa	aid For" IN THIS	S SPACE i	is less than	n 3, enter "3."	ADDIT.	FEE			ADDIT. FEE	
•	The "Highest Num	nber Previously Pai	id For" (Total or	Independ	ent) is the	highest number	found in	he app	ropriate box	in colu	umn 1.	